

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

10/597355

(07/21/2006)

CLAIMS

	AS FILED		AFTER		AFTER			
	1 ST AMENDMENT		2 ND AMENDMENT					
	IND.	DEP.	IND.	DEP.	IND.	DEP.		
1	1		1					
2		1		1				
3		1		1				
4	2		1					
5	2		1					
6	0		1					
7	0		1					
8	0		1					
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TOTAL IND.			1					
TOTAL DEP.			14					
TOTAL CLAIMS		■	15	■	■		■	

	AS FILED		AFTER		AFTER			
	1 ST AMENDMENT		2 ND AMENDMENT					
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